




<p>(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)</p> <p><u>1/19: Deposition 2/27: Participated in the Southern California Chapter of the Black Employees United for Equality (BEUFE) conference.</u></p> <p> </p> <p> </p> <p> </p> <p> </p> <p> </p> <p> </p> <p> </p>		<p>(12) NORMAL WORK HOURS</p>	
		<p>(13) PRIVATE VEHICLE LICENSE NUMBER</p>	
		<p>(14) MILEAGE RATE CLAIMED</p>	
		<p>AGENCY ACCOUNTING OFFICE USE ONLY</p> <p>PAID BY REVOLVING FUND CHECK NUMBER</p>	
<p>(15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753, and 0754 pertaining to vehicle safety and seat belt usage.</p>			
<p>CLAIMANT'S SIGNATURE</p> <p></p>	<p>DATE</p>	<p>(16.) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT</p> <p></p>	<p>DATE</p>
<p>(17.) SIGNATURE AND TITLE OF AUTHORITY FOR SPECIAL EXPENSES (See Item 17 on reverse)</p> <p></p>			<p>DATE</p>